



Healthy Behaviors Program & lowa Health and Wellness Plan Toolkit for Stakeholders

July 2014







Dear community organizations and leaders:

The Iowa Department of Human Services (DHS) is pleased that so many Iowans have enrolled in health coverage through the new Iowa Health and Wellness Plan (IHWP). Many thanks to the hard work of everyone involved in outreach and enrollment efforts across the state. While eager to support continued enrollment activities, we also need your help reaching out to IHWP members about their new coverage and encouraging participation in the Healthy Behaviors Program, a financially-based reward program to prevent illness and encourage wellness.

To assist your outreach, we have developed a toolkit that includes information and promotional materials about the Healthy Behaviors Program. The toolkit also includes updated materials to support ongoing Iowa Health and Wellness Plan outreach and enrollment efforts. Additional materials, including flyers, posters and fact sheets will be available at www.iahealthlink.gov.

You will notice this toolkit is branded IA Health Link – DHS' new campaign to communicate details of the Iowa Health and Wellness Plan to members and stakeholders. The campaign and website (www.iahealthlink.gov) will expand awareness, enrollment, and involvement in the Iowa Health and Wellness Plan. Additionally, the campaign will increase members' understanding of healthy behaviors and how to utilize the plan's benefits and services.

Thanks to your efforts, thousands of uninsured Iowans now have comprehensive health coverage through the Iowa Health and Wellness Plan. Encouraging participation in the Healthy Behaviors Program offers an effective way to help Iowans be healthy and stay healthy.

Please contact Lindsay Buechel at lbueche@dhs.state.ia.us for additional outreach information.

Thank you for your support.

Jennifer Vermeer Medicaid Director

Iowa Department of Human Services

Documents attached:

- Healthy Behaviors Overview
- Sample newsletter/email content
- Sample social media posts
- Healthy Behaviors Flyer
- Iowa Health and Wellness Plan materials (overview, communication samples, flyers)
- Additional information







Healthy Behaviors Program Outreach Materials







Healthy Behaviors Overview/Member FAQ

What is the Healthy Behaviors Program?

The Healthy Behaviors Program is a new way for all Iowa Health and Wellness Plan (IHWP) members to work with health care providers to be healthy and stay healthy. Having a good relationship with your primary care provider is an important part of taking responsibility for your health. Participating in the Healthy Behaviors Program helps IHWP members begin the conversation with providers and saves money.

lowa Health and Wellness members who complete the Healthy Behaviors requirements will not be charged a monthly contribution. A contribution or "premium" is the amount of money members pay each month for health coverage. During the first year of coverage no lowa Health and Wellness Plan member will be charged a premium. After that, some members may be charged a monthly premium if they decide not to complete the Healthy Behaviors requirements.

To participate in the Healthy Behaviors Program and avoid paying a monthly contribution after the first year of coverage IHWP members must:

- 1) Get a physical exam from a health care provider.
- 2) Complete a health risk assessment (HRA) or survey that asks questions about your health.

What is the monthly contribution?

There are no charges for health services, dental services or prescriptions in 2014. Starting in 2015, although there is no charge when you visit a health care provider, depending on family income some members will be charged a small monthly contribution or "premium." Some Iowa Wellness Plan members will be charged \$5 per month and Iowa Marketplace Choice Plan members will be charged \$10 per month. Iowa Wellness Plan members with individual earnings less than \$5,835 per year (\$7,865 for family of 2) will not be charged a monthly premium.

Remember, Iowa Health and Wellness Plan members who choose to take good care of themselves by completing the healthy behaviors requirements each year will not be charged a monthly premium. That's right – all Iowa Health and Wellness Plan members can receive free health care for choosing to take specific steps to protect your health. The only exception is an \$8 charge for using the emergency room for non-emergency services.







Why should lowa Health and Wellness Plan members participate?

Completing healthy behaviors requirements helps you stay healthy and saves you money. Importantly, it means you are making a decision to take responsibility for your health and quality of life.

Completing the health risk assessment helps your provider understand your health care needs and work with you to manage your health. Getting a physical exam is the first of many preventive health services that ensure you get the care you need. Many of the top risk factors leading to illness and premature death are preventable if they are caught early. Even if you have a chronic condition such as diabetes, high blood pressure, or other medical issues, your provider can recommend steps to manage your risks and improve your quality of life.

Participating in the Healthy Behaviors Program also saves money. Remember, all Iowa Health and Wellness Plan members who complete healthy behaviors requirements each year will not be charged a monthly premium in the following year.

Are Iowa Health and Wellness Plan members *required* to participate in the Healthy Behaviors Program?

No. Iowa Health and Wellness Plan members are not required to participate in the Healthy Behaviors Program. However, after the first year of health coverage plan members who decide not to complete the Healthy Behaviors requirements may be charged a monthly premium. Importantly, not participating means you are missing out on a chance to take control of your health. Getting annual check-ups and routine preventive care helps Iowa Health and Wellness Plan members be healthy and stay healthy.

What is a health risk assessment (HRA) and how do lowa Health and Wellness Plan members complete it?

A health risk assessment (HRA) is a survey that asks questions about your health and your experience in getting health services. Not all health care providers will use the same survey but whatever survey your provider uses will ask similar questions. Many providers serving lowa Health and Wellness Plan members will use a survey called "Assess My Health" that takes between 15-45 minutes to complete.

Completing a health risk assessment survey gives health care providers important information about you so they can work with you to ensure you get the health care services you need. It also provides an opportunity for you to be involved in your health care and work with your doctor to stay healthy.

Wellness Plan Members

To complete the survey online, members should request an access code from their provider and go to AssessMyHealth.com. If the member's provider does not have a code, the member may enter MBR11 Call 1-800-338-8366, 8 a.m. -5 p.m., Monday-Friday to complete the survey by phone.







Marketplace Choice Plan Members

To complete the health risk assessment, Marketplace Choice members can use the assessment available from their health plan.

- CoOportunity Health members: Go to cooportunityhealth.com. Click 'Set Up Your Account" to log on and complete the assessment.
- Coventry Health Care members: Go to coventryhealthcare.com. Click "My Online Services" to log on and complete the assessment.

What about the physical exam? Why visit a doctor if I am not sick?

An annual "physical" or "check-up" refers to a medical exam you receive from a health care provider that is aimed at preventing health problems before they occur. In this exam the health care provider will do things like check your blood pressure and pulse, listen to your lungs with a stethoscope, recommend preventive screenings or take a blood sample to check your cholesterol. This is different from the type of exam you might get if you visit a health care provider when you are sick or hurt and have specific health problems that need to be addressed.

Scheduling a regular physical exam keeps your provider updated about your health so you can get the care you need and gives you a chance to talk to your health care provider about any health questions or concerns. Even if you do not feel sick, you should get a physical exam from your health care provider at least every year. Remember, under the lowa Health and Wellness Plan, you will not be charged for check-ups and preventive screenings.







Sample communication content: Healthy Behaviors (newsletter/email to Iowa Health and Wellness Plan members)

The Healthy Behaviors Program offers a new way for Iowa Health and Wellness Plan members to stay healthy. It also keeps more money in your pocket.

All Iowa Health and Wellness Plan members receive free health services during the first year of coverage. After that, although there is no charge when you go to the doctor, you may be required to make a small monthly contribution called a "premium." However, if Iowa Health and Wellness Plan members complete specific Healthy Behaviors requirements they will not be charged a monthly premium. That's right – you can receive free health care each year if you choose to take specific steps to protect your health. The only exception is an \$8 charge for using the emergency room for non-emergency services.

Act now! Don't wait until you are sick to visit your health care provider. Take these two steps to good health and keep more money in your pocket:

- 1) Get a physical exam from a health care provider.
- 2) Complete a Health Risk Assessment, a survey that asks questions about your healthy history. To complete the survey online, members must request an access code from their health care provider. Visit AssessMyHealth.com to complete the assessment. You can call 1-800-338-8366, 8 a.m. 5 p.m., Monday- Friday to complete the survey by phone.

Participating in the Healthy Behaviors Program helps you stay healthy and saves you money. Importantly, it means you are making a decision to take control of your health and your quality of life.







Sample social media posts: Healthy Behaviors

Below are sample social media posts you can distribute through social media channels. The goal is to provide high-level information about the Healthy Behaviors Program and encourage individuals to complete program requirements.

Example Facebook Posts

Healthy Behaviors Program: Take two steps to good health and keep more money in your pocket. Iowa Health and Wellness Plan members schedule an appointment with your health care provider today to get started!

Don't wait until you are sick, get started on staying healthy today! Get a check-up from your health care provider and complete the Healthy Behaviors survey. The Healthy Behaviors program lets you take action to stay healthy and keep more money in your pocket. Schedule your appointment today!

Take action to stay healthy and keep more money in your pocket! The Healthy Behaviors Program makes it easy: get a check-up and complete a health survey. Iowa Health and Wellness Plan members call your health care provider today to get started!

The Healthy Behaviors Program is a new way for Iowa Health and Wellness Plan members to stay healthy and continue to receive health care services for free. Just get a check-up from your health care provider and complete a health survey. Call your provider today to schedule your exam!

Example Twitter Posts

#HealthyBehaviors Program: Two steps to good health & more money in your pocket. Call your health care provider to get started!

Get a check-up and take a survey. Two #HealthyBehaviors that save money. Call your health care provider today!

Take action to be healthy and save money! Call your health care provider about two #HealthyBehaviors that keep you covered for free.

Use your health coverage to stay healthy and save money! #HealthyBehaviors Program makes it easy, call your health care provider today!







Healthy Behaviors Wellness Plan Member Flyer

http://dhs.iowa.gov/sites/default/files/HealthyBehaviors_MemberComm_Wellness.pdf





Be Healthy, Stay Healthy

To continue receiving free coverage under the lowa Wellness Plan, you must complete the following Healthy Behaviors:

1. Health Risk Assessment (HRA)

- Go online to AssessMyHealth.com.
- You will need to enter a five-digit code. You can get this code from your provider. This will let your provider see your results. If your provider does not have a code, enter MBR11.
- Complete the assessment. When done, enter your Medicaid member ID number. Select 'yes' to share your results with your provider. You must enter your member ID to get credit for the Healthy Behavior.
- 4. Take your results to your wellness exam.

2. Wellness Exam

- Call your primary care provider and schedule your check-up.
- Talk to your provider about completing the health risk assessment. Your provider might be able to help.
- 3. Keep your appointment and work with your provider to stay healthy.



Questions?

Call Iowa Medicaid Member Services at 1-800-338-8366, or 515-256-4606 in the Des Moines area, 8:00 a.m. - 5:00 p.m., Monday-Friday.

Comm. 456 (5/14)







Healthy Behaviors Marketplace Choice Member Flyer

http://dhs.iowa.gov/sites/default/files/HealthyBehaviors_MemberComm_Marketplace.pdf



Be Healthy, Stay Healthy

To continue receiving free coverage under the lowa Marketplace Choice Plan, you must complete the following Healthy Behaviors:

1. Health Risk Assessment (HRA)

 If you are a CoOportunity Health member, go online to: www.cooportunityhealth.com. Click 'Set Up Your Account" to log on and complete the assessment.

or

- If you are a Coventry Health Care member, go online to: www.coventryhealthcare.com. Click 'My Online Services' to log on and complete the assessment.
- Complete the assessment and take your results to your wellness exam. You may also use the Iowa Medicaid HRA. Either your health plan HRA or the Iowa Medicaid HRA will count as your Healthy Behavior.

2. Wellness Exam

- 1. Call your primary care provider and schedule your check-up.
- Talk to your provider about completing the health risk assessment. Your provider might be able to help.
- 3. Keep your appointment and work with your provider to stay healthy.



Care on

terms

Questions?

Call Iowa Medicaid Member Services at 1-800-338-8366, or 515-256-4606 in the Des Moines area, 8:00 a.m. - 5:00 p.m., Monday-Friday.

Comm. 457 (5/14)







Iowa Health and Wellness Plan
Outreach Materials
*Items Specific to the Overall Program, Not Only Healthy
Behaviors, As Outlined in Previous Sections







Iowa Health and Wellness Plan Overview

What is the Health Insurance Marketplace?

On October 1, 2013, a new Health Insurance Marketplace opened in every state. The Marketplace is a one-stop online shop designed so consumers can easily compare health plans and apply for health care coverage. Coverage obtained through the Marketplace became effective starting January 1, 2014.

Iowans can apply for coverage through the online Marketplace by visiting www.iahealthlink.gov, by phone at the federal hub at 1-800-318-2596 or through the Department of Human Services (DHS) Contact Center at 1-855-889-7985, or in person at a local DHS office.

Consumers fill out one application, then receive information about their available health care coverage options. Information provided on the application helps determine what health care coverage options are available to an individual or family and whether they qualify for financial assistance. Filling out an application does not obligate anyone to buy coverage.

Many uninsured lowans using the marketplace will be eligible for free or low-cost health care coverage through the lowa Health and Wellness Plan or other Medicaid programs. Others can receive financial help to lower the cost of buying private insurance plans available on the marketplace.

What is the Iowa Health and Wellness Plan?

The Iowa Health and Wellness Plan is a new Medicaid program created to provide comprehensive health care coverage to low-income, uninsured Iowans ages 19 to 64. Enrollment for the Iowa Health and Wellness Plan began on October 1, 2013, and coverage began January 1, 2014.

The Iowa Health and Wellness Plan is one program that includes two separate coverage options. Eligibility is based on household income.

- Iowa Wellness Plan: Covers adults ages 19 to 64 whose income is at or below 100 percent of the Federal Poverty Level (\$11,670 for individuals or \$15,730 for a family of two). The Iowa Wellness Plan is administered by Iowa Medicaid. Members have access to the statewide Medicaid provider network which means they have access to care from providers and hospitals in their local communities.
- Iowa Marketplace Choice Plan: Covers adults age 19 to 64 with income from 101 percent through 133 percent of the Federal Poverty Level (between \$11,670 and \$15,730 for individuals or \$15,731-\$20,921 for a family of two). The Marketplace Choice Plan allows members to select from participating commercial health care coverage plans available through the Health Insurance Marketplace. Medicaid pays the premiums to the commercial health plan on behalf of the member. Members have access to the network of local health care providers and hospitals served by the commercial insurance plan.







Who can enroll in the lowa Health and Wellness Plan?

To be eligible for the Iowa Health and Wellness Plan, you must:

- Be an adult age 19 to 64.
- Have income that does not exceed 133 percent of the Federal Poverty Level (\$15,521 for an individual or \$20,921 for a family of two).
- Live in Iowa and be a U.S. citizen.
- Not be otherwise eligible for Medicaid or Medicare.

Eligible individuals who need specialized medical services (such as those with complex medical conditions or mental, physical or developmental disorders) will be eligible for comprehensive coverage through lowa's traditional Medicaid program.

What benefits are covered by the Iowa Health and Wellness Plan?

The Iowa Health and Wellness Plan provides comprehensive health benefits and allows members to choose from health care providers located in their communities. More than 40 percent of uninsured adults in Iowa could be eligible for the Iowa Health and Wellness Plan. There are no out-of-pocket costs during the first year and limited costs after that.

Benefits include doctor visits, prescriptions, preventive health services, mental health services, hospitalizations, and more. Members have access to the statewide network of Medicaid providers and participating dentists.

What dental benefits are covered in the lowa Health and Wellness Plan?

Starting May 1, 2014 all Iowa Health and Wellness Plan members can receive dental coverage through the Dental Wellness Plan. The dental plan will cover basic dental care with no cost to members. This includes preventive services such as routine exams and teeth cleanings as well as emergency services and treatment. Members who receive regular preventive dental care and follow recommended treatment plans can earn coverage for more expensive restorative services such as non-emergency crowns and bridges. To learn more about the dental wellness plan, click: XXX

How much does the Iowa Health and Wellness Plan cost?

The Iowa Health and Wellness Plan provides comprehensive health benefits at minimal or no cost to members. There are no out-of-pocket costs for health services during the first year and limited costs after that. Depending on family income, some members may be required to pay a small monthly contribution or "premium." There are no other out-of-pocket costs for health services except an \$8 charge for using the emergency room for non-emergency services. However, Iowa Health and Wellness Plan members who complete specific Healthy Behaviors requirements each year will not be charged a monthly premium.







What is the Healthy Behaviors Program?

Once you are enrolled in the Iowa Health and Wellness Plan, the Healthy Behaviors Program offers a way for members to work with health care providers to be healthy and stay healthy. Participating in the Healthy Behaviors Program helps Iowa Health and Wellness Plan members establish a relationship with a health care provider and saves money.

Iowa Health and Wellness Plan members who complete the Healthy Behaviors requirements will not be charged a monthly contribution. A contribution or "premium" is the amount of money members pay each month to keep health coverage. During the first year of coverage there are no monthly contributions for any Iowa Health and Wellness Plan members. After that, some members may be charged a monthly premium if they decide not to complete the Healthy Behaviors requirements.

To participate in the Healthy Behaviors Program and avoid paying monthly premiums after the first year of coverage IHWP members must get a physical exam from a health care provider and complete a health risk assessment (HRA) or survey that asks questions about your health.

How can individuals apply for the Iowa Health and Wellness Plan?

- 1) Visit XXX, call the Department of Human Services (DHS) Contact Center at 1-855-889-7985, or apply in person at a local DHS office.
- 2) Complete an application. Be ready to provide personal information including Social Security number, proof of income, general health information, and current health insurance information.
- 3) After completing the application, individuals will receive information about their available health insurance options. Individuals eligible for the Iowa Health and Wellness Plan can be automatically enrolled and will receive information about choosing a primary health care provider.

When can individuals enroll in the lowa Health and Wellness Plan?

The Health Insurance Marketplace began accepting applications for health coverage on October 1, 2013. Low-income *lowans eligible for the lowa Health and Wellness Program can enroll year-round*, but the enrollment period for those buying other health plans through the Marketplace closed on March 31, 2014. [There are some exceptions (qualifying life event) but for coverage in 2015 you can only purchase Marketplace health plans during the open enrollment period (Nov.15, 2014 - Feb. 15, 2015).]

What information is needed to apply for health care coverage through the Health Insurance Marketplace?

The application asks basic information about individuals and members of the household so you should collect this information ahead of time. Be ready to provide a Social Security number, information about existing health insurance coverage, and proof of income for members of your household. Individuals can obtain a marketplace application checklist from HealthCare.gov to get a list of the information they will need to provide.







Where can people go for additional information or help enrolling in the lowa Health and Wellness Plan?

Help is available online, by phone and in person – for free.

- Online: Visit www.iahealthlink.gov.
- *Phone*: Call the Department of Human Services (DHS) Contact Center at 1-855-889-7985 between 7 a.m. and 6 p.m. Monday Friday.
- In person: Many organizations and health department offices have people trained and certified to help you understand your new health insurance options. You can visit https://localhelp.healthcare.gov/ and search by city and state or zip code to find a list of personal assistance locally available. The list includes contact information, office hours, and types of help offered and will be frequently updated.

Why should individuals have health care coverage?

- Peace of mind and protection from expensive medical bills. No one plans to get sick or hurt. Having health care coverage means individuals don't have to worry about expensive or unexpected medical bills if they get sick – they just focus on getting better. People with health care coverage have a better chance at staying healthy because having coverage makes it easier. People with health care coverage also are more likely to get preventive services and regular care for chronic medical conditions like diabetes and heart disease.
- Access to health care. All health insurance plans offered through the Health
 Insurance Marketplace are required to cover the most important benefits such as
 doctor visits, preventive care, prescriptions, emergency care, hospital stays, and
 more. And plans are not allowed to charge additional costs for many preventive
 health services such as blood pressure screenings, cholesterol tests, blood sugar
 tests, colon cancer screenings, mammograms, and birth control supplies.
- Guaranteed coverage. Health plans can no longer deny people health coverage based on pre-existing health conditions and plans can't drop people's coverage when they get sick.
- Affordable options are now available: Individuals may be eligible for free or lowcost health care coverage through the lowa Health and Wellness Plan or for financial assistance to reduce the cost of insurance available in the Health Insurance Marketplace.
- Most lowans are now required to have health insurance. Starting in January 2014, most people are required to have health care coverage. Individuals who are not covered may pay penalties.







Sample communication: Iowa Health & Wellness Plan (newsletter/email content for outreach to potentially eligible)

Uninsured? Act now to see if you are eligible for free or low-cost health coverage through the Iowa Health and Wellness Plan, a new Medicaid program for uninsured adults. Enrollment in this program is open all year round. As of January 1, 2014 most people can be fined for being uninsured. Visit XX to find out if you are eligible for the Iowa Health and Wellness Plan. This is one health plan you can't afford to be without!

The Iowa Health and Wellness Plan was created to provide comprehensive health coverage to uninsured Iowans ages 19 to 64 with income that does not exceed 133 percent of the Federal Poverty Level (\$15,521 for an individual; \$20,921 for family of 2 or higher depending on family size).

The Iowa Health and Wellness Plan provides comprehensive health benefits at minimal or no cost to members. It covers doctor visits, prescriptions, dental care, preventive health services, mental health services, hospitalizations and more. There are no out-of-pocket costs for health services in 2014 and limited costs after that.

There are many ways to apply:

- 1) Fill out an application online: https://dhsservices.iowa.gov.
- 2) Call the toll-free Iowa Department of Human Services (DHS): 855-889-7985 (7am-6pm; M-F).
- 3) Call the toll-free national number: 800-318-2596 (24/7).
- 4) Visit your local DHS office.
- 5) Print a paper application and mail to DHS. Click this link for more information XXX.

Having health coverage means you don't have to worry about expensive or unexpected medical bills if you get sick or hurt. It also makes it easier to stay healthy. Take control of your health and quality of life. Take action now to sign up for health coverage through the lowa Health and Wellness Plan.







Sample social media posts: Iowa Health & Wellness Plan

Below are sample social media posts you can distribute through your social media channels. The goal is to provide high-level information about the lowa Health and Wellness Plan and encourage individuals to apply.

Example Facebook Posts

Uninsured? You could be eligible for free or low-cost health insurance through the lowa Health and Wellness Plan. It is not too late to enroll! Visit iahealthlink.gov to view your health coverage options.

lowa Health and Wellness Plan. Health insurance you can't afford to be without! It is not too late to enroll. Visit iahealthlink.gov to see if you are eligible.

Prescription drug coverage and access to a primary care physician are just two of the benefits of the new Iowa Health and Wellness Plan. To see if you qualify, visit iahealthlink.gov.

Iowa Health and Wellness Plan offers free or low-cost health insurance. To see if you qualify, visit iahealthlink.gov and enroll today!

You can't afford to be uninsured. The Iowa Health and Wellness Plan offers free or low-cost health insurance. It's not too late to sign up. Visit iahealthlink.gov to see if you are eligible.

Example Twitter Posts

#Uninsured Iowans could be eligible for free or low-cost health insurance w/the Iowa Health and Wellness Plan. Visit iahealthlink.gov.

Iowa Health and Wellness Plan. Health insurance you can't afford to be without! Visit iahealthlink.gov to see if you are eligible.

Access to a primary care provider & prescription drugs are just 2 benefits of the Iowa Health and Wellness Plan. Visit iahealthlink.gov.

Iowa Health and Wellness Plan offers free or low-cost health insurance. To see if you qualify, visit iahealthlink.gov and enroll today!







Additional Outreach Materials

Additional outreach materials on the Healthy Behaviors Program and the Iowa Health and Wellness Plan, including flyers, posters, and digital materials will be available at www.iahealthlink.gov. Check back often to download the most current information.

Additional Iowa Health and Wellness Plan Information

The following documents (attached) provide more detailed information about the Iowa Health and Wellness Plan. Downloadable versions available at www.iahealthlink.gov.

- Dental Wellness Plan Fact Sheet
- Iowa Wellness Plan Managed Care Map



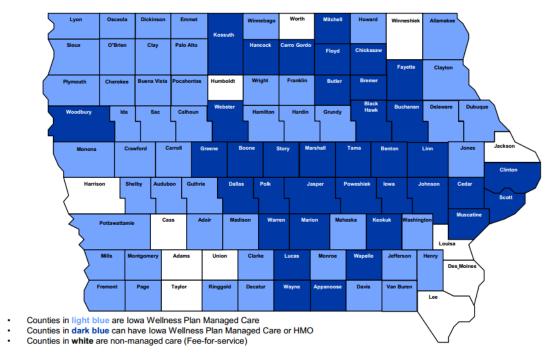




Iowa Wellness Plan Managed Care Map

http://dhs.iowa.gov/sites/default/files/IowaWellnessPlanManagedCareMapJune2 014_0.pdf











Dental Wellness Plan Fact Sheet: http://www.dwpiowa.com

△ DELTA DENTAL

Dental Wellness Plan

The Dental Wellness Plan offers members the opportunity to earn additional dental benefits by practicing good oral health habits and seeking regular preventive care. The flowchart below shows how a member can earn these additional benefits. For more detailed information on procedures covered under each benefit tier, reference the benefit chart on the back side of this sheet.

Member Experience





Member Welcome Packet & Health Assessment

- Members complete oral health risk self-assessment.
- Data used to identify oral health behaviors and risks for communication, education and outreach.



DENTAL HOME



Community Outreach & Referral

- Links patients with dentists in the community.
- Ensures members understand benefits, the importance of good oral health and compliance with follow-up visits.

Core Benefits Immediate Access

- · Diagnostic, Preventive services
- Emergency services to relieve pain
- Stabilization services for basic function, including full dentures

Enhanced Benefits Complete 1st recall within

All Core Benefits plus the following:

- Restorations
- · Root canals
- · Non-surgical gum treatment
- Some oral surgery

Enhanced Plus Benefits Complete 2nd recall within

Complete 2nd recall within 6-12 months of 1st recall

All Core and Enhanced Benefits plus the following:

- Crowns
- Tooth replacements (bridges and partials)
- Gum surgery

Member must return for a recall exam every 6-12 months from previous exam to maintain earned benefits. Otherwise, member will only have access to Core Benefits and will need to "start over" to earn additional benefits.







Core Benefits

ORAL HEALTH CLINICAL RISK ASSESSMENT (1 PER YEAR)

DIAGNOSTIC AND PREVENTIVE

- · Exams and Education
- Comprehensive (max of 1 every 3 years, per dentist)
- Periodic Exams (max of 2 per 12 months, 6 months apart)
- Perio Comprehensive Exam (max 1 per 12 months)
- Cleanings (max of 2 per 12 months, at least 6 months apart; or 4 per 12 months for Perio cleaning for first 24 months post-surgery and therapy) - Perio Cleaning
- Cleanings
- X-Rays - Bitewing, Occlusal X-Rays (max of 1 per 12 months)

- Other
- Fluoride (max of 1 per 12 months)

- Full Mouth/Panoramic (max of 1 every 5 years)

- Oral Hygiene Education (max of 1 every 3 years)

- Problem-Focused Exams
- · Extractions/Oral Surgery
- Surgical Incision and Drain
- Anesthesia

- Palliative Treatment
- Periapical/Panoramic X-rays

- Consultation (max 1 per 12 months)

Pupal Therapy

STABILIZATION - Allows members to maintain basic human functions or prevents a condition from deteriorating in an imminent timeframe to a more serious situation (subject to specific criteria)

EMERGENCY SERVICES - Primarily to relieve significant pain or to relieve acute infections (unlimited subject to specific criteria)

- · Restorations for large cavities impinging on the pulp
- · Scaling and root planing
- Stainless steel (posterior)/resin crowns (anterior) for fractured teeth (once per tooth per lifetime)
- Full mouth debridement (max of 1 per lifetime)
- Extractions (related to delivery of dentures)
- Denture adjustments and repairs (2 adjustments/repairs per year)
- · Complete dentures for edentulous and partial for replacement of anterior teeth

Enhanced Benefits

ALL CORE BENEFITS PLUS THE FOLLOWING:

- · Restorations and other restorative services
 - · Root canals, apexification, apicoectomy, and other endodontic services
 - · Non-surgical gum treatment

- Denture adjustments, repairs, relines (limit 2 per 12 months)
- · Non-surgical and surgical extractions and other oral surgery services
- · Designated adjunctive services

Enhanced Plus Benefits

ALL CORE AND ENHANCED BENEFITS PLUS THE FOLLOWING:

- · Crowns/Onlays for anterior permanent teeth with extensive coronal destruction/broken cusp and posterior teeth with root canal therapy and cracked tooth syndrome
- · Tooth Replacements
- Dentures (partial) for replacing anterior teeth and posterior teeth when there are fewer than eight teeth in occlusion or when required to balance the occlusion
- Dentures (complete) for edentulous
- Bridges (only covered for designated clinical conditions in which a partial denture is contraindicated)
- Gum Surgery

The above Enhanced Plus additional services are subject to prior authorization.

DWPMEB022014

